

DEC 09 2005



Ralph E. Jocke  
Patent  
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NAME: Mail Stop AF  
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FAX NUMBER: (571) 273-8300

DATE: December 9, 2005

SENDER: Ralph E. Jocke, Esq.

FAX NUMBER: (330) 722-6446

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COMMENTS: Please refer to the attached **Notice of Appeal** for Application **10/722,067**.

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Practitioner's Docket No. D-1182 R3

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appellants: Steven Shepley  
Application No.: 10/722,067  
Filed: November 25, 2003  
Title: Cash Dispensing Automated  
Banking Machine Diagnostic Method

Confirmation No. 4154  
Art Unit 2876  
Examiner Thien Le

Mail Stop AF  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD  
OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. 41.31)**

Applicants hereby appeal to the Board from the decision of the Primary Examiner, mailed September 9, 2005, regarding all unallowed claims (including rejected claims 1-22).

**1. STATUS OF APPLICANT**

This application is on behalf of other than a small entity.

**CERTIFICATION OF TRANSMISSION UNDER 37 C.F.R. SECTIONS 1.8(a) AND 1.6(d)****FACSIMILE**

I hereby certify that, on the date shown below, this correspondence is being transmitted by facsimile to the Patent and Trademark Office at (571) 273-8300.

Date: December 9, 2005

  
Ralph E. Jocke

(Notice of Appeal from the Primary Examiner to the Board for 10/722,067 page 1 of 2)

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**2. FEE FOR FILING NOTICE OF APPEAL**

Pursuant to 37 C.F.R. 41.20(b)(1), the fee for filing the Notice of Appeal is:

Other than a small entity \$500.00

Notice of Appeal fee due \$500.00

**3. EXTENSION OF TIME**

The proceedings herein are for a patent application and the provisions of 37 C.F.R.1.136 apply.

Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition and fee for an extension of time. If any time extension and fee is required, this is a request therefor.

**4. TOTAL FEE DUE**

The total fee due is:

Notice of Appeal fee \$500.00

**TOTAL FEE DUE \$500.00**

**5. FEE PAYMENT**

Charge Account No. 09-0428 (Interbold) the sum of \$500.00

**6. FEE DEFICIENCY**

If any additional extension and/or fee is required, this is a request therefor and to charge Account No. 09-0428 (Interbold).

If any additional fee for claims is required, charge Account No. 09-0428 (Interbold).



SIGNATURE OF PRACTITIONER

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(Notice of Appeal from the Primary Examiner to the Board for 10/722,067 page 2 of 2)